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JUN 2 6 2002

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE	
Prefix	Serial
DATE REC	EIVED

Name of Offering ([] check if this is		_	ate change.)		
Oasis Entertainment's					
Filing Under (Check box(es) that app		Rule 505 [X] R	<u> Rule 506</u> []Se	ection 4(6)	[x] ULOE
Type of Filing: [x] New Filing [] Amendment				
	A. BASIC IDENTIF	ICATION DATA	\		
1. Enter the information requested					
Name of Issuer ([] check if this i		ne has changed, a	nd indicate chan	ge.)	
Oasis Entertainment's Four	th Movie Project, inc.				
Address of Executive Offices (Nur 4330 SE Federal Highway, Str		te, Zip Code) Tele	phone Number (Including Are	ea Code)
Address of Principal Business Op		eet City State Zir	Code) Telepho	ne Number	
(if different from Executive Offices		501, 511, 51010, 21,			
n/a				PF	ROCES
Brief Description of Business					0.0.5
Durable Madical Equipment				$O_{\mathbf{J}}$	UL 2 2 2002
Durable Medical Equipment				Γ,	TUOMOO»
					THOMSON FINANCIAL
Type of Business Organization				•	LINUINCINE
[x] corporation	[] limited partnership, a		[] other	(please spec	cify):
] business trust	[] limited partnership, to			0.4/0.0/0.0	
Actual or Estimated Date of Incorp Jurisdiction of Incorporation or Or		[X] Actual	[] Estimated	04/09/98	
GENERAL INSTRUCTIONS	ganization. Nevaua				
Federal:					
Who Must File: All issuers making an 230.501 et seg. or 15 U.S.C. 77d(6).	offering of securities in relian	ce on an exemption	under Regulation I	D or Section 4	l(6), 17 CFR
When to File: A notice must be filed no	o later than 15 days after the f	irst sale of securities	in the offering. A r	notice is deem	ned filed with
the U.S. Securities and Exchange Cor	mmission (SEC) on the earlier	r of the date it is rece	eived by the SEC a	it the address	given below
or, if received at that address after the to that address.	adate on which it is due, on the	ne date it was mailed	by United States	registered or o	certified mail
Where to File: U.S. Securities and Exc	change Commission, 450 Fifth	h Street, N.W., Wash	hington, D.C. 2054	9.	
Copies Required: Five (5) copies of the				lly signed. An	y copies not
manually signed must be photocopies Information Required: A new filing must				he лате of th	e issuer and
offering, any changes thereto, the infor	rmation requested in Part C, a	nd any material chan			
in Parts A and B. Part E and the Appe	indix need not be filed with the	SEC.			

Filing Fee: There is no federal filing fee. **State:**

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

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A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: - Each promoter of the issuer, if the issuer has been organized within the past five years; - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

- Each executive softicer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner		xecutive Office	r [X]Director	. [] General and/or Managing Partne
Full Name (Last name first, i	•						
Business or Residence Adda 4330 SE Federal Hig			p Code)				
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[]Exe	cutive Officer	[]Director	[]General and/or Managing Partne
Full Name (Last name first, i	f individual)						
Business or Residence Addr	ess (Number an	nd Street, City, State, Zi	p Code)				
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Exe	cutive Officer	[] Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)						
Business or Residence Addr	ess (Number an	nd Street, City, State, Zi	p Code)				
Check Box(es) that Apply:	[Promoter]	[] Beneficial Owner	[Exec	utive Officer	[] Director	• •	General and/or Managing Partner
Full Name (Last name first, it	'individual)						
Business or Residence Addr	⇒ss (Number an	d Street, City, State, Zip	p Code)	•			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[Exec	utive Officer	[] Director		General and/or Managing Partner
Full Name (Last name first, if	individual)						***************************************
Business or Residence Address	ess (Number an	d Street, City, State, Zip	p Code)				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

								<u> </u>				
		· · · · · · · · · · · · · · · · · · ·		B. INF	FORMAT	TION AB	OUT OF	FERING				
	the issuing?	er sold, o	r does the	e issuer ir	ntend to s	ell, to nor	n-accredit	ed invest	ors in this	•		No X]
Ans	wer also	in Appen	dix, Colur	nn 2, if fili	ing under	ULOE.						
2. Wh	at is the	minimum	investme	nt that wil	l be acce	pted from	any indiv	/idual?			\$ None	!
3. Doe	es the offe	ering perr	nit joint o	wnership	of a singl	e unit?						No]
indi sale brol or d	rectly, and es of secu ker or dea lealer. If r	y commis ırities in tl	sion or sing the offering ered with five (5) p	milar reming. If a per the SEC persons to	uneration son to be and/or wi be listed	for solicite listed is sith a state lare asso	ation of pr an associ or states ociated pe	urchasers ated pers s, list the r rsons of s	in conne on or age name of t	directly or ction with ent of a he broker		·
Full Na	me (Last r	name first,	if individua	l)								
EQU	ITRADE	SECUR	RITIES C	ORPOR	ATION							
		dence Add	•		-	•	•	30-1771				
Name o	of Associat	ted Broker	or Dealer									
		Person les" or ch					cit Purcha	asers		[X]] All State	es:
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last n	ame first, i	f individua	l)								
Busines	s or Resider	nce Address	(Number a	nd Street, C	City, State, Z	Zip Code)						
Name of	Associated	l Broker or	Dealer	<u> </u>						<u>.</u>		
States	in Which	Person L	isted Has	Solicited	or Inten	ds to Soli	cit Purcha	asers				
(Check	"All Sta	tes" or ch	eck indiv	idual Stat	tes)					[] All Sta	ites
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(RI)	(SC)	[SD]	[TN]	[TX]	(UTI	[VT]	IVA1	[WA]	IWVI	rwn	[WY]	(PR1

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
Type of Security		Aggregate Offering Price	An	nount Already Sold
Debt	\$	-0-	\$	-0-
Equity	\$	1,000,000	\$	-0-
[X] Common [] Preferred	•	1,000,000	•	Ü
Convertible Securities (including warrants)	\$	-0-	\$	-0-
Partnership Interests	\$	- 0-	\$	-0-
Other (Specify).	\$	-0-	\$	-0-
Total	\$_	1,000,000	\$	-0-
Answer also in Appendix, Column 3, if filing under ULOE.				
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u> , indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Do	Aggregate bllar Amount
	Νι	ımber Investors	of	Purchases
Accredited Investors		-0-	\$	-0-
Non-accredited Investors		-0-	\$	-0-
Total (for filings under Rule 504 only)	\$	-0-	<u>\$</u>	-0-
Answer also in Appendix, Column 4, if filing under ULOE.				
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
Time of official	Ту	pe of Security	Do	llar Amount
Type of offering Rule 505	Ī		\$	Sold
Regulation A	_		- vg	
Rule 504	_		- \$ \$	
Total			\$	
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
Transfer Agent's Fees		[X]\$	1,0	000
Printing and Engraving Costs		[] \$		
Legal Fees			10,0	00
Accounting Fees			5,0	00
Engineering Fees				
Sales Commissions (specify finders' fees separately)			70,0	00
Other Fees:		[] \$		
Total		[X]\$	86,	000

b.	Enter the difference between the aggregate offering price given in response to Part C-
	Question 1 and total expenses furnished in response to Part C- Question 4.a. This
	difference is the "adjusted gross proceeds to the issuer."

914,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	[]\$	_[]\$
Purchase of real estate	-[]\$	[-]\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$	[.]\$
Construction or leasing of plant buildings and facilities	[]\$.[]\$ <u>200,000</u>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	[]\$
Repayment of indebtedness	[]\$200,000	2 [] \$ <u>100,000</u>
Working capital	[]\$	1 15 414,000
Other (specify): Capitalized Advertising	[]\$	11\$ 100,000
, , , , ,	[]\$	_[]\$
Column Totals	[]\$ 100,000	[]\$814,000
Total Payments Listed (column totals added)	[] \$ <u>_</u>	714,000

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Oasis Entertainment's Fourth Movie Project, Inc.	Signature Signature	Date June 13, 2002
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Mark A. Libratore	President	

ATTENTION:

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)